| Case 09-3 | 39089 | Doc 1 | Filed 10/19/09 | Entered 10/19/09 16:33:48 | Desc Main |
|--------------------------------|----------------------|--------------|----------------|---|-------------------------|
| | | | Document _ | Page 1 of 36 | |
| B22C (Official Form 22) | C) (Cha _l | pter 13) (01 | /08) | According to the calculations required b | y this statement: |
| | | | | ☐ The applicable commitment period | od is 3 years. |
| In re: Cobbs, Toreyung | Γ | | | ✓ The applicable commitment period | od is 5 years. |
| | Debto | or(s) | | ▼ Disposable income is determined | under § 1325(b)(3). |
| Case Number: | | | | □ Disposable income is not determi | nod under \$ 1225(b)(2) |

(If known)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

☐ Disposable income is not determined under § 1325(b)(3).

(Check the boxes as directed in Lines 17 and 23 of this statement.)

In addition to Schedules I and J, this statement must be completed by every individual Chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

| | | Part I. REPO | ORT OF INCOME | | | | |
|---|---|---|---|--------------------------|--------------------------------|--|--|
| 1 | a. [| ital/filing status. Check the box that applies and complete only Column A ("Debtor Married. Complete both Column A ("Debtor") | or's Income") for Lines 2-10. 's Income") and Column B ("Spouse | | | | |
| 1 | the s | igures must reflect average monthly income receiv ix calendar months prior to filing the bankruptcy c th before the filing. If the amount of monthly incor- divide the six-month total by six, and enter the res | ase, ending on the last day of the ne varied during the six months, you | Column A Debtor's Income | Column B Spouse's Income | | |
| 2 | Gros | ss wages, salary, tips, bonuses, overtime, commi | ssions. | \$ 7,110.41 | \$ | | |
| 3 | a and one l attac | me from the operation of a business, profession denter the difference in the appropriate column(s) business, profession or farm, enter aggregate numb hment. Do not enter a number less than zero. Do not enter a number less than zero. The notes entered on Line b as a deduction in Part I | of Line 3. If you operate more than ers and provide details on an ot include any part of the business | | | | |
| | a. | Gross receipts | \$ | | | | |
| | b. | Ordinary and necessary operating expenses | \$ | | | | |
| | c. | Business income | Subtract Line b from Line a | \$ | \$ | | |
| 4 | diffe | t and other real property income. Subtract Line rence in the appropriate column(s) of Line 4. Do not not not any part of the operating expenses enter IV. | ot enter a number less than zero. Do | | | | |
| т | a. | Gross receipts | \$ | | | | |
| | b. | Ordinary and necessary operating expenses | \$ | | | | |
| | c. | Rent and other real property income | Subtract Line b from Line a | \$ | \$ | | |
| 5 | Inte | rest, dividends, and royalties. | | \$ | \$ | | |
| 6 | Pens | ion and retirement income. | | \$ | \$ | | |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse. | | | \$ | \$ | | |

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main B22C (Official Form 22C) (Chapter 13) (01/08) Page 2 of 36

| 8 | | | | | | | | |
|----|---|---|--|--|----------|-----------------|----|-----------|
| Ü | Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ | Spouse S | \$ | \$ | | \$ | |
| 9 | Income from all other sources. Specisources on a separate page. Total and omaintenance payments paid by your or separate maintenance. Do not incompare a victim of international or domestic terrorism. a. b. | enter on Line 9. Do not inc spouse, but include all of lude any benefits received to f a war crime, crime agains | lude alimether paymander the S | ony or separate ents of alimon Social Security | y | | \$ | |
| 10 | Subtotal. Add Lines 2 thru 9 in Colum through 9 in Column B. Enter the total | | ompleted, | add Lines 2 | \$ | 7,110.41 | \$ | |
| 11 | Total. If Column B has been complete and enter the total. If Column B has no Column A. | | | | \$ | | | 7,110.41 |
| | Part II. CALCUL | ATION OF § 1325(b)(4 | 4) COMN | MITMENT P | ERIOI |) | | |
| 12 | Enter the amount from Line 11. | | | | | | \$ | 7,110.41 |
| 13 | Marital Adjustment. If you are marrithat calculation of the commitment per your spouse, enter the amount of the in basis for the household expenses of your a. b. c. | riod under § 1325(b)(4) doe ncome listed in Line 10, Co | es not requ lumn B tha | ire inclusion of at was NOT pai | the inc | ome of | | |
| | Total and enter on Line 13. | | | | | | \$ | 0.00 |
| 14 | Subtract Line 13 from Line 12 and 6 | enter the result. | | | | | \$ | 7,110.41 |
| 15 | Annualized current monthly income 12 and enter the result. | for § 1325(b)(4). Multiply | the amou | unt from Line 14 | by the | number | \$ | 85,324.92 |
| 16 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | | | | | | |
| | a. Enter debtor's state of residence: Illi | nois | b. Ente | er debtor's hous | ehold si | ze: _2 _ | \$ | 54,599.00 |
| 17 | Application of § 1325(b)(4). Check the The amount on Line 15 is less the 3 years" at the top of page 1 of the The amount on Line 15 is not less period is 5 years" at the top of page 1. | an the amount on Line 16 is statement and continue was than the amount on Lin | c. Check the children this state that this state the check the che | ne box for "The attement. The ck the box for " | The app | | | - |
| | Part III. APPLICATION O | F § 1325(b)(3) FOR DE | TERMIN | NING DISPO | SABL | E INCON | 1E | |
| 18 | Enter the amount from Line 11. | | | | | | \$ | 7,110.41 |

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Page 3 of 36 B22C (Official Form 22C) (Chapter 13) (01/08)

| 19 | Marital adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero. S | | | | | | |
|-----|---|--------------------|--------|-----------------------------|------------------|----|-----------|
| 20 | | (b)(2) Culating at | Line 1 | O from Line 19 and anten th | o moonit | \$ | 7,110.41 |
| 21 | Annualized current monthly income 12 and enter the result. | | | | | \$ | 85,324.92 |
| 22 | Applicable median family income. | Enter the amoun | from l | Line 16. | | \$ | 54,599.00 |
| 23 | Application of § 1325(b)(3). Check the applicable box and proceed as directed. The amount on Line 21 is more than the amount on Line 22. Check the box for "Disposable income under § 1325(b)(3)" at the top of page 1 of this statement and complete the remaining parts of this statement and complete the remaining parts of this statement determined under § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this state complete Parts IV, V, or VI. | | | | | | s not |
| | | | | ONS ALLOWED UND | | | |
| 24A | National Standards: food, apparel miscellaneous. Enter in Line 24A the Expenses for the applicable househol the clerk of the bankruptcy court.) | "Total" amount | from I | RS National Standards for | Allowable Living | \$ | 1,306.00 |
| 24B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for | | | | | | |
| | Household members under 65 years of age Household members 65 years of age or older | | | | | | |
| | a1. Allowance per member | 60.00 | a2. | Allowance per member | 144.00 | | |
| | b1. Number of members | 2 | b2. | Number of members | 0 | | |
| | c1. Subtotal | 120.00 | c2. | Subtotal | 0.00 | \$ | 120.00 |
| | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). | | | | + | | |

Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Document Page 4 of 36 Case 09-39089 B22C (Official Form 22C) (Chapter 13) (01/08)

| D22C (| Omei | ai Form 22C) (Chapter 13) (01/08) | | | |
|--------|--|--|---|--------|----------|
| | the II infor | Il Standards: housing and utilities; mortgage/rent expense. Enter, and Standards: housing and Utilities Standards; mortgage/rent expense for your communities available at www.usdoj.gov/ust/ or from the clerk of the bandard of the Average Monthly Payments for any debts secured by your bact Line b from Line a and enter the result in Line 25B. Do not enter | ounty and household size (this akruptcy court); enter on Line become, as stated in Line 47; | | |
| 25B | a. | IRS Housing and Utilities Standards; mortgage/rental expense | \$ 1,193.00 | | |
| | b. | Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47 | \$ | | |
| | c. | Net mortgage/rental expense | Subtract Line b from Line a | \$ | 1,193.00 |
| 26 | and 2 Utilit | Il Standards: housing and utilities; adjustment. If you contend that 25B does not accurately compute the allowance to which you are entities Standards, enter any additional amount to which you contend you our contention in the space below: | led under the IRS Housing and | | |
| | | | | \$ | |
| | an ex | Il Standards: transportation; vehicle operation/public transportate pense allowance in this category regardless of whether you pay the extegardless of whether you use public transportation. | openses of operating a vehicle | | |
| 25. | Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 7. | | | | |
| 27A | | $1 \boxed{2}$ or more. | | | |
| | Trans Loca Statis | u checked 0, enter on Line 27A the "Public Transportation" amount for sportation. If you checked 1 or 2 or more, enter on Line 27A the "Ope I Standards: Transportation for the applicable number of vehicles in the stical Area or Census Region. (These amounts are available at <a amount="" applicable="" from="" he="" href="https://www.use.com/ww</td><td>erating Costs" irs="" metropolitan<="" td=""><td>\$</td><td>434.00</td> | \$ | 434.00 | |
| 27B | Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an | | | | |
| | which | Il Standards: transportation ownership/lease expense; Vehicle 1. (h you claim an ownership/lease expense. (You may not claim an ownertwo vehicles.) | | | |
| | | $ \checkmark$ 2 or more. | | | |
| 28 | Trans | r, in Line a below, the "Ownership Costs" for "One Car" from the IRS sportation (available at www.usdoj.gov/ust/ or from the clerk of the bastal of the Average Monthly Payments for any debts secured by Vehic act Line b from Line a and enter the result in Line 28. Do not enter a | ankruptcy court); enter in Line b le 1, as stated in Line 47; | | |
| | a. | IRS Transportation Standards, Ownership Costs | \$ 489.00 | | |
| | Average Monthly Payment for any debts secured by Vehicle 1, as b. stated in Line 47 \$ 503.14 | | | | |
| | c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a | | | | |

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Document Page 5 of 36 B22C (Official Form 22C) (Chapter 13) (01/08)

| | Official Form 22C) (Chapter 13) (01/08) | | | |
|----|---|-----------------|----------|--|
| 29 | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero. | b | | |
| | a. IRS Transportation Standards, Ownership Costs \$ 0.00 | | | |
| | Average Monthly Payment for any debts secured by Vehicle 2, as b. stated in Line 47 \$ | | | |
| | c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a | $\square _{\$}$ | | |
| 30 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for a federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self-employme taxes, social-security taxes, and Medicare taxes. Do not include real estate or sales taxes. | | 1,174.02 | |
| 31 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. | | | |
| 32 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. | | | |
| 33 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 49. | \$ | | |
| 34 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of | | | |
| 35 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. | | | |
| 36 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. | | | |
| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone | | | |

\$

5,074.16

Total Expenses Allowed under IRS Standards. Enter the total of Lines 24 through 37.

38

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Page 6 of 36 B22C (Official Form 22C) (Chapter 13) (01/08)

| | | Subpart B: Additional Expense De Note: Do not include any expenses that y | | | | |
|----|---|--|---------------------------------|---|---------|--------|
| | expe | Ith Insurance, Disability Insurance, and Health Savings anses in the categories set out in lines a-c below that are reas se, or your dependents. | | | | |
| | a. | Health Insurance | \$ | 205.24 | | |
| | b. | Disability Insurance | \$ | 9.88 | | |
| 39 | c. | Health Savings Account | \$ | | | |
| | Tota | l and enter on Line 39 | | | \$ | 215.12 |
| | | ou do not actually expend this total amount, state your act pace below: | ual total av | erage monthly expenditures in | | |
| 40 | Cont mont elder | tinued contributions to the care of household or family not the expenses that you will continue to pay for the reasonable rely, chronically ill, or disabled member of your household on the to pay for such expenses. Do not include payments lister | e and neces member o | ssary care and support of an f your immediate family who is | s \$ | 50.00 |
| 41 | you a Servi | ection against family violence. Enter the total average reas actually incur to maintain the safety of your family under the ices Act or other applicable federal law. The nature of these idential by the court. | Family Vi | olence Prevention and | \$ | |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary. | | | | \$ | |
| 43 | actua secon trust | cation expenses for dependent children under 18. Enter the ally incur, not to exceed \$137.50 per child, for attendance at andary school by your dependent children less than 18 years attee with documentation of your actual expenses, and you asonable and necessary and not already accounted for in | a private of age. You must expl | or public elementary or a must provide your case ain why the amount claimed | u \$ | |
| 44 | cloth Natio | itional food and clothing expense. Enter the total average in gexpenses exceed the combined allowances for food and onal Standards, not to exceed 5% of those combined allowances. You stop in the clerk of the bankruptcy court.) It tional amount claimed is reasonable and necessary. | clothing (ances. (This | pparel and services) in the IRS information is available at | \$ | |
| 45 | chari | ritable contributions. Enter the amount reasonably necessal itable contributions in the form of cash or financial instrume of U.S.C. § 170(c)(1)-(2). Do not include any amount in exame. | nts to a cha | ritable organization as defined | \$ | |

Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.

\$

265.12

46

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Document Page 7 of 36 B22C (Official Form 22C) (Chapter 13) (01/08)

| | | S | Subpart C: Deductions for Do | ebt Payment | | | |
|----|--|---|---|---|---|----|--------|
| | you o Paym the to follo | re payments on secured claims own, list the name of the creditor nent, and check whether the paymotal of all amounts scheduled as a wing the filing of the bankruptcy. Enter the total of the Average N | , identify the property securing ment includes taxes or insurance contractually due to each Securicase, divided by 60. If necessary | the debt, state the e. The Average Mored Creditor in the | Average Monthly onthly Payment is 60 months | | |
| 47 | | Name of Creditor | Property Securing the Debt | Average Monthly Payment | Does payment include taxes or insurance? | | |
| | a. | Elgin Mental Health Ce | Automobile (1) | \$ 449.35 | ☐ yes 🗹 no | | |
| | b. | Elgin Mental Health Ce | Automobile (1) | \$ 48.62 | ☐ yes 🗹 no | | |
| | c. | Elgin Mental Health Ce | Automobile (1) | \$ 5.17 | ☐ yes 🗹 no | | |
| | | | Total: Ac | dd lines a, b and c. | | \$ | 503.14 |
| | Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. | | | | | | |
| 48 | | Name of Creditor | Property Securing | the Debt | 1/60th of the Cure Amount | | |
| | a. | | | | \$ | | |
| | b. | | | | \$ | | |
| | c. | | | | \$ | | |
| | | | | Total: A | add lines a, b and c. | \$ | |
| 49 | such | nents on prepetition priority cl as priority tax, child support and ruptcy filing. Do not include cu | alimony claims, for which you | u were liable at the | time of your | \$ | |
| | | pter 13 administrative expenses esulting administrative expense. | s. Multiply the amount in Line | a by the amount in | Line b, and enter | | |
| | a. | Projected average monthly Cha | pter 13 plan payment. | \$ 1 | ,267.99 | | |
| 50 | b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) X 6.8% | | | | | | |
| | c. | Average monthly administrative case | e expense of Chapter 13 | Total: Multiply L and b | ines a | \$ | 86.22 |
| 51 | Total | Deductions for Debt Payment. En | ter the total of Lines 47 through | gh 50. | | \$ | 589.36 |
| | | S | ubpart D: Total Deductions | from Income | | | |

Total of all deductions from income. Enter the total of Lines 38, 46, and 51.

5,928.64

52

| | | al Form 22C) (Chapter 13) (01/08) | | | |
|----|---|---|---|---------------------------|----------------------|
| | | Part V. DETERMINATION OF DISPOSABLE INCOME UNDER | R § 1325(b)(2) | | |
| 53 | Tota | l current monthly income. Enter the amount from Line 20. | | \$ | 7,110.41 |
| 54 | disab | port income. Enter the monthly average of any child support payments, foster care payility payments for a dependent child, reported in Part I, that you received in accordant cable nonbankruptcy law, to the extent reasonably necessary to be expended for such | ice with | \$ | |
| 55 | from | lified retirement deductions. Enter the monthly total of (a) all amounts withheld by yarges as contributions for qualified retirement plans, as specified in § 541(b)(7) and yments of loans from retirement plans, as specified in § 362(b)(19). | | \$ | |
| 56 | Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52. | | | | |
| | for win lin total | uction for special circumstances. If there are special circumstances that justify additional there is no reasonable alternative, describe the special circumstances and the respectance are special circumstances. Total the expenses in Line 57. You must provide your case trustee with documentation of these expenses ide a detailed explanation of the special circumstances that make such expenses neces onable. | ulting expenses es and enter the s and you must | | |
| 57 | | Nature of special circumstances | Amount of expense | | |
| | a. | | \$ | | |
| | b. | | \$ | | |
| | c. | | \$ | | |
| | | Total: Add I | Lines a, b, and c | \$ | |
| 58 | II. | al adjustments to determine disposable income. Add the amounts on Lines 54, 55, 5 the result. | 56, and 57 and | \$ | 5,928.64 |
| | | | | | |
| 59 | Mon | thly Disposable Income Under § 1325(b)(2). Subtract Line 58 from Line 53 and ent | ter the result. | \$ | 1,181.77 |
| 59 | Mon | Part VI. ADDITIONAL EXPENSE CLAIMS | ter the result. | \$ | 1,181.77 |
| 59 | Other and wincom | | n, that are required from your curren | for the | health ly |
| | Other and wincom | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. | n, that are required from your curren | for the t month | health ly |
| 60 | Other and wincom | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. | n, that are required from your curren All figures should | for the t month | health ly |
| | Other and wincom average | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. | n, that are required from your curren All figures should Monthly A | for the t month | health ly |
| | Other and wincom average a. | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. | n, that are required from your current All figures should Monthly A | for the t month | health ly |
| | Other and wincom average a. b. | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. | Monthly A \$ \$ | for the t month | health ly |
| | Other and wincom average a. b. | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. Expense Description | Monthly A \$ \$ | for the t month | health ly |
| | Other and wincom average a. b. c. | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relater of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. Expense Description Total: Add Lines a, b and | Monthly A \$ \$ \$ \$ \$ \$ \$ | for the t month d reflect | health ly your |
| | Other and wincom average a. b. c. | Part VI. ADDITIONAL EXPENSE CLAIMS r Expenses. List and describe any monthly expenses, not otherwise stated in this form relfare of you and your family and that you contend should be an additional deduction the under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page ge monthly expense for each item. Total the expenses. Expense Description Total: Add Lines a, b and Part VII. VERIFICATION are under penalty of perjury that the information provided in this statement is true and | Monthly A \$ \$ \$ \$ \$ \$ \$ | for the t month d reflect | health ly your |

| | Doc 1 | Filed 10/19/09 | Entered 10/19/09 16:33:48 | Desc Main |
|-----------------------------|-------|----------------|---------------------------|-----------|
| B1 (Official Form 1) (1/08) | | Document | Page 9 of 36 | |

| United States Bankruptcy Court Northern District of Illinois | | | | | Volu | ıntary Petition | |
|--|--|--|-------------------------------|-------------------------------------|--|-----------------------|-------------------------------------|
| Name of Debtor (if individual, enter Last, First, Midd Cobbs, Toreyung T | dle): | Name o | f Joint Debt | or (Spous | se) (Last, First, | Middle): | |
| All Other Names used by the Debtor in the last 8 yea (include married, maiden, and trade names): | rs | | | | e Joint Debtor is d trade names) | | years |
| Last four digits of Soc. Sec. or Individual-Taxpayer I EIN (if more than one, state all): 2718 | .D. (ITIN) No./Complete | | or digits of S more than o | | | axpayer I.D |). (ITIN) No./Complete |
| Street Address of Debtor (No. & Street, City, State & 205 Atwell St | ż Zip Code): | Street A | ddress of Jo | oint Debto | or (No. & Stree | et, City, Stat | te & Zip Code): |
| Elgin, IL | ZIPCODE 60124-849 | 6 | | | | 7 | ZIPCODE |
| County of Residence or of the Principal Place of Bus Kane | iness: | County | of Residenc | e or of th | e Principal Pla | ce of Busin | ess: |
| Mailing Address of Debtor (if different from street ac | ddress) | Mailing | Address of | Joint Del | btor (if differen | nt from stree | et address): |
| | ZIPCODE | | | | | 2 | ZIPCODE |
| Location of Principal Assets of Business Debtor (if d | ifferent from street addres | s above): | | | | | |
| | | | | | | 2 | ZIPCODE |
| Type of Debtor (Form of Organization) (Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ✓ Full Filing Fee attached ☐ Filing Fee to be paid in installments (Applicable to attach signed application for the court's considerat is unable to pay fee except in installments. Rule 10 3A. | (Check Health Care Busine Single Asset Real E U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other Tax-Exe (Check box, Debtor is a tax-exer Title 26 of the Unit Internal Revenue C | Chapter 9 Recognition of a Fore Chapter 11 Main Proceeding Chapter 12 Chapter 15 Petition for Recognition of a Fore Nonmain Proceeding Chapter 13 Recognition of a Fore Nonmain Proceeding Recognition of a Fore Nonmain Proceeding Nature of Debts (Check one box.) Debts are primarily consumer Debts are debts, defined in 11 U.S.C. business of states Code (the ode). Debts are primarily for a personal, family, or household purpose." Chapter 11 Debtors Check one box: Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D) Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D) | | | Check one box.) oter 15 Petition for signition of a Foreign Proceeding of a Foreign nain Proceeding Debts box.) Debts are primarily business debts. | | |
| Filing Fee waiver requested (Applicable to chapter attach signed application for the court's considerat | | Check a | | le boxes: iled with he plan w | this petition | repetition fro | om one or more classes of |
| Statistical/Administrative Information ✓ Debtor estimates that funds will be available for one of the property distribution to unsecured creditors. | | | paid, there | will be no | o funds availabl | le for | THIS SPACE IS FOR COURT USE ONLY |
| Estimated Number of Creditors | | 10,001- 25,000 | 25,001- 50,000 | | 50,001- 100,000 | Over 100,000 | |
| | 000,001 to \$10,000,001 million to \$50 million | \$50,000,001 \$100 million | | | \$500,000,001 to \$1 billion | More than \$1 billion | |
| Estimated Liabilities So to \$50,001 to \$100,001 to \$500,001 to \$1,000 \$500,000 \$1,000 | | \$50,000,001 \$100 million | | 00,001 | \$500,000,001 to \$1 billion | More than | |

| Prior Bankruptcy Case Filed Within Last 8 | 8 Years (If more than two, attach | additional sheet) |
|--|--|---|
| Location Where Filed: NDIL | Case Number: 08-13600 | Date Filed: 05/28/2008 |
| Location Where Filed: N/A | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner or | Affiliate of this Debtor (If mo | ore than one, attach additional sheet) |
| Name of Debtor: None | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) Exhibit A is attached and made a part of this petition. | (To be completed whose debts are properties of the attorney for the petitioner of that I have informed the petition chapter 7, 11, 12, or 13 of the explained the relief available under the complete of the c | xhibit B if debtor is an individual rimarily consumer debts.) named in the foregoing petition, declar ner that [he or she] may proceed unde tle 11, United States Code, and hav nder each such chapter. I further certified he notice required by § 342(b) of the |
| | X | 10/19/09 |
| | Signature of Attorney for Debtor(s) | Date |
| Exhi (To be completed by every individual debtor. If a joint petition is filed, e Exhibit D completed and signed by the debtor is attached and ma If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached | nde a part of this petition. | ach a separate Exhibit D.) |
| Landt D also completed and signed by the joint debtor is attach | ed a made a part of this petition. | |
| <u> </u> | | nis District for 180 days immediately |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general | partner, or partnership pending in | this District. |
| ☐ Debtor is a debtor in a foreign proceeding and has its principal pl or has no principal place of business or assets in the United States in this District, or the interests of the parties will be served in reg | but is a defendant in an action or pr | oceeding [in a federal or state court] |
| Certification by a Debtor Who Reside (Check all app Landlord has a judgment against the debtor for possession of debtor | olicable boxes.) | |
| (Name of landlord or less | or that obtained judgment) | |
| (Address of lar | ndlord or lessor) | |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Case 09-39089 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

Voluntary Petition

Doc 1

Filed 10/19/09

Document

Entered 10/19/09 16:33:48

Page 10 of 36

Name of Debtor(s):

Cobbs, Toreyung T

Desc Main

Page 2

Cobbs, Toreyung T

Page 11 of 36 Name of Debtor(s):

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

Doc 1

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Toreyung T Cobbs

Signature of Debtor

Toreyung T Cobbs

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

October 19, 2009

Signature of Attorney*



X

Signature of Attorney for Debtor(s)

Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602 (312) 578-9530 Fax: (312) 578-9524

October 19, 2009

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

| X | |
|---|--|
| | |

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| X | |
|---|---|
| | S |

ignature of Foreign Representative

Printed Name of Foreign Representative

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Case 09-39089 Doc 1 B1D (Official Form 1, Exhibit D) (12/08)

Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main

Document Page 12 of 36 United States Bankruptcy Court **Northern District of Illinois**

| IN RE: | | Case No |
|-------------------|-----------|------------|
| Cobbs, Toreyung T | | Chapter 13 |
| | Debtor(s) | 1 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot

| do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities. |
|---|
| Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed. |
| 1. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency. |
| 2. Within the 180 days before the filing of my bankruptcy case , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed. |
| □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] |
| |
| If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing. |
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); Active military duty in a military combat zone. |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |

I certify under penalty of perjury that the information provided above is true and correct.

Date: October 19, 2009

Signature of Debtor: /s/ Toreyung T Cobbs

 $_{B6\ Summary}$ (Follows - 09-39089, Doc 1

Filed 10/19/09

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Document Page 13 of 36 United States Bankruptcy Court

| | | -P | |
|----------|----------|--------|-------|
| Northern | District | of Ill | inois |

| IN RE: | | Case No. |
|-------------------|-----------|------------|
| Cobbs, Toreyung T | | Chapter 13 |
| | Debtor(s) | • |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NUMBER OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|---------------------|--------------|---------------|-------------|
| A - Real Property | Yes | 1 | \$ 0.00 | | |
| B - Personal Property | Yes | 3 | \$ 23,925.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 30,188.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 2 | | \$ 74,730.58 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | \$ 4,140.51 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 3,699.80 |
| | TOTAL | 14 | \$ 23,925.00 | \$ 104,918.58 | |

Form 6 - Statistical Summary (1207) Doc 1

Filed 10/19/09 Entered 10/19/09 16:33:48

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| United States | Bankruptcy Court |
|---------------|---------------------|
| Northern D | istrict of Illinois |

| IN RE: | | Case No. |
|-------------------|-----------|------------|
| Cobbs, Toreyung T | | Chapter 13 |
| | Debtor(s) | • |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 4,140.51 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 3,699.80 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ 7,110.41 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 10,188.00 |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 74,730.58 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 84,918.58 |

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(If known)

IN RE Cobbs, Toreyung T

Debtor(s)

Case No.

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--------------------------------------|--|---------------------------------------|--|----------------------------|
| None | | 4 | | |
| | | | | |
| | | | | |
| | | | | |
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TOTAL

(Report also on Summary of Schedules)

0.00

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Entered 10/19/09 16:33:48 Page 16 of 36 Desc Main

(If known)

IN RE Cobbs, Toreyung T

Debtor(s)

Case No.

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|-----|---|------------------|---|---------------------------------------|--|
| 1. | Cash on hand. | | Cash on Hand | | 50.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Checking account w/ TCF Bank | | 1,400.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | | Security Deposit w/ Landlord - \$1945.00 - No value to the Debtor | | 0.00 |
| 4. | Household goods and furnishings, include audio, video, and computer equipment. | | Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances. | | 1,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | | Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other colletions or collectibles | | 250.00 |
| 6. | Wearing apparel. | | Used Clothing | | 250.00 |
| 7. | Furs and jewelry. | | Misc Costume Jewelry | | 75.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | Х | | | |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | | Term life thru work - no cash value | | 0.00 |
| 10. | Annuities. Itemize and name each issue. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | Pension with current employer - 100% Exempt | | 0.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| | | | | | |

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Debtor(s)

Page 17 of 36

IN RE Cobbs, Toreyung T

_ Case No. _

(If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | | | | , |
|-----|---|------------------|--|---------------------------------------|--|
| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 1998 Chevy Cavalier 2008 Pontiac G8 | | 900.00 20,000.00 |
| 26. | Boats, motors, and accessories. | Х | | | |
| | Aircraft and accessories. | Х | | | |
| | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| | | | | | |
| | | | | | |

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IN RE Cobbs, Toreyung T

t Page 18 of 36

Case No. ____

Debtor(s)

(If known)

Desc Main

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|--------------------------------------|---------------------------------------|--|
| 32. Crops - growing or harvested. Give particulars. | Х | | | |
| 33. Farming equipment and implements. | х | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |
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Debtor(s)

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IN RE Cobbs, Toreyung T

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Case No. _____(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY | SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|---|--------------------------------------|-------------------------------|--|
| SCHEDULE B - PERSONAL PROPERTY | | | LALMI HONS |
| Cash on Hand | 735 ILCS 5 §12-1001(b) | 50.00 | 50.00 |
| Checking account w/ TCF Bank | 735 ILCS 5 §12-1001(b) | 1,400.00 | 1,400.00 |
| Household goods, including but not limited to: TVs, chairs, tables, sofas, bedroom furniture, some kitchen appliances. | 735 ILCS 5 §12-1001(b) | 1,000.00 | 1,000.00 |
| Books, Pictures, and other art objects, antiques, stamp, coin, record, tape, compact disc, and other colletions or collectibles | 735 ILCS 5 §12-1001(a) | 250.00 | 250.00 |
| Used Clothing | 735 ILCS 5 §12-1001(a) | 250.00 | 250.00 |
| Misc Costume Jewelry | 735 ILCS 5 §12-1001(b) | 75.00 | 75.00 |
| Pension with current employer - 100% Exempt | 735 ILCS 5 §12-1006(a) | 100% | 0.00 |
| 1998 Chevy Cavalier | 735 ILCS 5 §12-1001(c) | 2,400.00 | 900.00 |
| | | | |

Filed 10/19/09 Document Entered 10/19/09 16:33:48 Page 20 of 36 Desc Main

IN RE Cobbs, Toreyung T

Debtor(s)

Case No. _____(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|--------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 7418000031 | | | Installment account opened 7/09 | T | | | 26,961.00 | 6,961.00 |
| Elgin Mental Health Ce 750 S State St Elgin, IL 60123-7612 | | | | | | | | |
| | | | VALUE \$ 20,000.00 | | | | | |
| ACCOUNT NO. 7418000028 | | | Installment account opened 3/09 | | | | 2,917.00 | 2,917.00 |
| Elgin Mental Health Ce 750 S State St Elgin, IL 60123-7612 | | | | | | | | |
| | | | VALUE \$ 20,000.00 | | | | | |
| ACCOUNT NO. 7418000033 | | | Installment account opened 7/09 | T | | | 310.00 | 310.00 |
| Elgin Mental Health Ce 750 S State St Elgin, IL 60123-7612 | | | | | | | | |
| | | | VALUE \$ 20,000.00 | 1 | | | | |
| ACCOUNT NO. | | | | T | Т | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | j |
| | | | VALUE \$ | | | | | |
| 0 continuation sheets attached | | | (Total of t | Sul his 1 | | | \$ 30,188.00 | \$ 10,188.00 |
| | | | (Use only on I | | Tota | al | \$ 30,188.00 | |

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

Filed 10/19/09 Document Entered 10/19/09 16:33:48 Page 21 of 36 Desc Main

IN RE Cobbs, Toreyung T

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Debtor(s)

Case No. _____(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Stat. | istical Juliniary of Certain Labinities and Related Pata. |
|-------|---|
| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data. |
| V | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TY | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |
| | O continuation sheets attached |

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| bor (Official Form of) (12/07) | | Document | Page 22 of 36 |

IN RE Cobbs, Toreyung T

iment Page 22 of 36

Case No.

Desc Main

(If known)

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT CODEBTOR CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS OF CLAIM (See Instructions Above.) SUBJECT TO SETOFF, SO STATE **Payday Loan** ACCOUNT NO. XXX-XX-2718 Fiat Financial Money Center, LLC 174 N La Fox St South Elgin, IL 60177-1612 858.27 ACCOUNT NO. 154-9072-97949 **Lease Deficiency GMAC**

PO Box 380902 Bloomington, MN 55438-0902 7,957.11 **Utility or Cellular Service** ACCOUNT NO. 27888962-1-19 Ic Systems 444 Highway 96 E Saint Paul, MN 55127-2557 930.20 Assignee or other notification for: ACCOUNT NO. Ic Systems Com Ed **Customer Care Center** PO Box 805379 Chicago, IL 60680-5379

1 continuation sheets attached

Subtotal (Total of this page)

9,745.58

Total

(Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Filed 10/19/09 Document

Entered 10/19/09 16:33:48 Page 23 of 36

Desc Main

(If known)

IN RE Cobbs, Toreyung T

Debtor(s)

Case No. _

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (| Continuation Sheet) | | | | | |
|---|-----------|---------------------------------------|---|------------------|--------------|----------|----|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | 2 | AMOUNT OF CLAIM |
| ACCOUNT NO. 97436411221001320010608 | T | | Installment account opened 6/01 | \dagger | | | | |
| Sallie Mae 1002 Arthur Dr Lynn Haven, FL 32444-1683 | | | · | | | | | 53,673.00 |
| ACCOUNT NO. 1856812 | \dagger | | Open account opened 1/09 | + | | | | 00,070.00 |
| Tek-collect Inc 871 Park St Columbus, OH 43215-1441 | | | | | | | | 118.00 |
| ACCOUNT NO. | | | Assignee or other notification for: | \dagger | | | | 110100 |
| Anthony R. Bennardo D.d.s | | | Tek-collect Inc | | | | | |
| ACCOUNT NO. PD047-38134-26490001 | | | Payday Loan | + | | | | |
| The Payday Loan Store Of IL 268 S State St Elgin, IL 60123-0701 | | | | | | | | |
| ACCOUNT NO. 2009 LM 604 | | | Judgment | ╆ | | | | 1,000.00 |
| William Codd II & Charmaine Hooper C/O Andrew Carter 127 W Willow Ave Wheaton, IL 60187-5275 | | | Judgment | | | | | 10,194.00 |
| ACCOUNT NO. | | | | | | | | , |
| ACCOUNT NO. | | | | <u> </u> | | | | |
| | | | | | | | | |
| Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | | | e) | \$ | 64,985.00 |
| | | | (Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat | rt als Statis | o c | on al | \$ | 74,730.58 |

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Summary of Certain Liabilities and Related Data.) \$ 74,730.58

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| IN RE Cobbs, Toreyung T | | Document | Page 24 of 36 | Case No. | |

Debtor(s)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(If known)

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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Case No.

Debtor(s)

(If known)

Desc Main

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors

IN RE Cobbs, Toreyung T

Doc 1 Filed 10/19/09 Document

Entered 10/19/09 16:33:48 Page 26 of 36

Desc Main

(If known)

IN RE Cobbs, Toreyung T

Debtor(s)

Case No.

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C,

| Debtor's Marital Status | DEPENDENTS OF DE | EBTOR AND S | SPOUSE | |
|--|---|---|--------------------------------|----------------------|
| Single | RELATIONSHIP(S): Son | | | AGE(S): 10 |
| EMPLOYMENT: | DEBTOR | | SPOUSE | |
| Occupation See Sched Name of Employer How long employed Address of Employer | ule Attached | | | |
| Current monthly gross wages, Estimated monthly overtime | e or projected monthly income at time case filed), salary, and commissions (prorate if not paid monthly | \$ | | \$ \$ |
| 3. SUBTOTAL 4. LESS PAYROLL DEDUCTI a. Payroll taxes and Social Sec b. Insurance c. Union dues d. Other (specify) See Sche | curity | <u>\$</u> | 31,174.02 | \$ \$ \$ |
| 5. SUBTOTAL OF PAYROLI 6. TOTAL NET MONTHLY | | \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 2,969.90 4,140.51 | |
| 8. Income from real property9. Interest and dividends10. Alimony, maintenance or suthat of dependents listed above | on of business or profession or farm (attach detailed support payments payable to the debtor for the debtor's | \$ | | \$ \$ \$ |
| 12. Pension or retirement incom | | \$ \$ | S S | \$ \$ \$ |
| 13. Other monthly income (Specify) | | | 6 | \$ \$ \$ |
| 14. SUBTOTAL OF LINES 7 15. AVERAGE MONTHLY II | THROUGH 13 NCOME (Add amounts shown on lines 6 and 14) | \$ | 5 54,140.51 | \$ \$ |
| 16. COMBINED AVERAGE If there is only one debtor repeat | MONTHLY INCOME: (Combine column totals from total reported on line 15) | | \$Report also on Summary of Sc | 4,140.51 |

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Document Page 27 of 36

IN RE Cobbs, Toreyung T

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

Case No. _

Continuation Sheet - Page 1 of 1

EMPLOYMENT: DEBTOR SPOUSE

Occupation Activity Therapist
Name of Employer Elgin Mental Health

Name of Employer
How long employed

Elgin Mental Healh Center

9 years

Address of Employer 750 S State St Elgin, IL 60123-7612

Occupation Mental Health Counselor

Name of Employer Provena Health
How long employed 8 months

Address of Employer 19065 Hickory Creek Dr Ste 300

Mokena, IL 60448-8599

DEBTOR SPOUSE

Other Payroll Deductions:

 Retirement
 197.20

 Credit Union - Car Payment
 1,260.00

 403b
 43.62

 Std
 9.88

Filed 10/19/09 Document Entered 10/19/09 16:33:48 Page 28 of 36 Desc Main

3,699.80

IN RE Cobbs, Toreyung T

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Debtor(s)

Case No. _____(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 1,945.80 |
|---|---------------|----------|
| a. Are real estate taxes included? Yes No | | |
| b. Is property insurance included? Yes No | | |
| 2. Utilities: | ф | 005.00 |
| a. Electricity and heating fuel | \$ | 285.00 |
| b. Water and sewer | \$ | 25.00 |
| c. Telephone | \$ | 95.00 |
| d. Other Cell Phone | \$ | 95.00 |
| Cable And Internet | \$ | 95.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 50.00 |
| 4. Food | \$ | 400.00 |
| 5. Clothing | \$ | 100.00 |
| 6. Laundry and dry cleaning | \$ | 60.00 |
| 7. Medical and dental expenses | \$ | 49.00 |
| 8. Transportation (not including car payments) | \$ | 300.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | |
| 10. Charitable contributions | \$ | |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | |
| b. Life | \$ | |
| c. Health | \$ | |
| d. Auto | \$ | |
| e. Other | \$ | |
| | \$ | |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) | \$ | |
| | \$ | |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | |
| b. Other | \$ | |
| | | |
| 14. Alimony, maintenance, and support paid to others | _ \$ | |
| 15. Payments for support of additional dependents not living at your home | \$ | |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | |
| 17. Other Personal Care And Grooming | \$ | 150.00 |
| Vehicle Care And Maintenance | _{\$} | 50.00 |
| Bank Fees & Postage | \$ | 25.00 |
| | _ · | |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if | | |

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document: **None**

20. STATEMENT OF MONTHLY NET INCOME

applicable, on the Statistical Summary of Certain Liabilities and Related Data.

| a. Average monthly income from Line 15 of Schedule I | \$ 4,140.51 |
|--|--------------------|
| b. Average monthly expenses from Line 18 above | \$ 3,699.80 |
| c. Monthly net income (a. minus b.) | \$ 440.71 |

Document

Page 29 of 36

(If known)

IN RE Cobbs, Toreyung T

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Debtor(s)

Case No.

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 16 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: October 19, 2009 Signature: /s/ Toreyung T Cobbs Debtor **Toreyung T Cobbs** Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of ______ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature:

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

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Desc Main

Document Page 30 of 36 **United States Bankruptcy Court**

Northern District of Illinois

| IN RE: | | Case No. |
|-------------------|-----------|------------|
| Cobbs, Toreyung T | | Chapter 13 |
| | Debtor(s) | |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

60,581.00 2007 Income from employment

69,215.00 2008 Income from employment

7,110.41 2009 Income from employment (monthly)

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | Case 09-39089 | | ed 10/19/09 E ocument Pa | | | Desc Main |
|---------------|---|--|--|---|---|---|
| None | b. Debtor whose debts are not p preceding the commencement of \$5,475. If the debtor is an indiviousligation or as part of an alterna debtors filing under chapter 12 c is filed, unless the spouses are seen | rimarily consumer f the case unless the idual, indicate with tive repayment schor chapter 13 must | debts: List each payine aggregate value of an asterisk (*) any pedule under a plan by include payments and | ment or other the all property the payments that we an approved no dother transfers | ransfer to any creditor ma at constitutes or is affect were made to a creditor or inprofit budgeting and cre | ted by such transfer is less than n account of a domestic support dit counseling agency. (Married |
| None | c. All debtors: List all payments who are or were insiders. (Marria joint petition is filed, unless the | ed debtors filing u | nder chapter 12 or cha | apter 13 must ir | clude payments by either | |
| 4. Su | its and administrative proceeding | ngs, executions, ga | arnishments and atta | nchments | | |
| None | a. List all suits and administrative bankruptcy case. (Married debtor not a joint petition is filed, unless | ors filing under cha | pter 12 or chapter 13 | must include in | nformation concerning ei | |
| AND Willi | FION OF SUIT CASE NUMBER am Codd II & Charmaine per v. Debtor 2009 LM 604 | NATURE OF PR Collection | ROCEEDING | COURT OR AND LOCA' Circuit Cou | | STATUS OR DISPOSITION Judgment for Plaintiff |
| None | b. Describe all property that has the commencement of this case. or both spouses whether or not a | (Married debtors | filing under chapter 1 | 2 or chapter 13 | must include information | on concerning property of either |
| 5. Re | possessions, foreclosures and re | turns | | | | |
| None | List all property that has been rep the seller, within one year immedinclude information concerning joint petition is not filed.) | ediately preceding | the commencement of | of this case. (Ma | arried debtors filing unde | er chapter 12 or chapter 13 must |
| Citin PO E | IE AND ADDRESS OF CREDIT nortgage Box 9438 nersburg, MD 20898-9438 | OR OR SELLER | DATE OF REPO FORECLOSURE TRANSFER OR 2009 | E SALE, | DESCRIPTION AND OF PROPERTY 1885 Glenn Eagle C Foreclosed - No mo | ircle, Elgin, IL - |
| 6. As | signments and receiverships | | | | | |
| None | a. Describe any assignment of pr (Married debtors filing under cha unless the spouses are separated | apter 12 or chapter | 13 must include any as | - | | |
| None | b. List all property which has be commencement of this case. (Ma spouses whether or not a joint po | rried debtors filing | under chapter 12 or c | hapter 13 must | include information conc | erning property of either or both |
| 7. Gi | fts | | | | | |
| None | List all gifts or charitable contrib gifts to family members aggregat per recipient. (Married debtors for a joint petition is filed, unless the | ting less than \$200 iling under chapter | in value per individua 12 or chapter 13 mus | al family members include gifts | er and charitable contribu or contributions by either | tions aggregating less than \$100 |
| 8. Lo | sses | | | | | |
| None | List all losses from fire, theft, of commencement of this case . (Ma joint petition is filed, unless th | Iarried debtors filir | ng under chapter 12 or | r chapter 13 mu | st include losses by either | |
| 9. Pa | yments related to debt counseling | ng or bankruptcy | | | | |
| None | List all payments made or proper consolidation, relief under banks of this case. | rty transferred by o | | | | |

Case 09-39089

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Filed 10/19/09 Document

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PAYOR IF OTHER THAN DEBTOR

NAME AND ADDRESS OF PAYEE Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 500.00

Desc Main

10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

List all property owned by another person that the debtor holds or controls.

 \checkmark

15. Prior address of debtor

If debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY 1885 Glenn Eagle Circle, Elgin IL Moved 2009 Same 307 Cassidy Lane, Elgin, IL Same **Moved 2007**

16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

| Case 09-39089 | Doc 1 | Filed 10/19/09 | Entered 10/19/09 16:33:48 | Desc Mair |
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| | | Document | Page 33 of 36 | |

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

Non

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

√

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date: October 19, 2009 | Signature /s/ Toreyung T Cobbs | |
|------------------------|--------------------------------|------------------|
| | of Debtor | Toreyung T Cobbs |
| Date: | Signature | |
| | of Joint Debtor | |
| | (if any) | |

_____ **0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main Document Page 34 of 36 United States Bankruptcy Court Northern District of Illinois

Joint Debtor

Case 09-39089 Doc 1 Filed 10/19/09 Entered 10/19/09 16:33:48 Desc Main

Cobbs, Toreyung T 205 Atwell St Elgin, IL 60124-8496 Document Page 35 of 36 William Codd II & Charmaine Hooper C/O Andrew Carter 127 W Willow Ave Wheaton, IL 60187-5275

Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602

Com Ed Customer Care Center PO Box 805379 Chicago, IL 60680-5379

Elgin Mental Health Ce 750 S State St Elgin, IL 60123-7612

Fiat Financial Money Center, LLC 174 N La Fox St South Elgin, IL 60177-1612

GMAC PO Box 380902 Bloomington, MN 55438-0902

Ic Systems 444 Highway 96 E Saint Paul, MN 55127-2557

Sallie Mae 1002 Arthur Dr Lynn Haven, FL 32444-1683

Tek-collect Inc 871 Park St Columbus, OH 43215-1441

The Payday Loan Store Of IL 268 S State St Elgin, IL 60123-0701

Case 09-39089

Doc 1 Filed 10/19/09

Entered 10/19/09 16:33:48

Desc Main

Document Page 36 of 36 United States Bankruptcy Court

Northern District of Illinois

IN RE: Case No. Cobbs, Toreyung T Chapter 13 Debtor(s) DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept\$ ___ 3,500.00 Prior to the filing of this statement I have received\$ 500.00 3,000.00 The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: Debtor Other (specify): I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; entation of the debtor in adversary proceedings and other contested bankruptcy matt d. [Other provisions as needed] By agreement with the debtor(s), the above disclosed fee does not include the following services: **Litigation / Adversary Proceedings** \$400.00 for Motions to Redeem **Credit Counseling Fees**

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 19, 2009

Date

Gleason & Gleason 77 W Washington, Ste 1218 Chicago, IL 60602 (312) 578-9530 Fax: (312) 578-9524